

**IN THE UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF SOUTH CAROLINA  
CHARLESTON DIVISION**

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IN RE: AQUEOUS FILM-FORMING  
FOAMS PRODUCTS LIABILITY  
LITIGATION

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MDL No. 2:18-mn-2873-RMG

**This Document Relates to  
Case No. 2:24-cv-01028-RMG**

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**MOTION TO SUBSTITUTE PARTY**

PLEASE TAKE NOTICE THAT Counsel for Plaintiff Diane Johnson gives notice and suggests upon the record, pursuant to Rule 25(a)(1) of the Federal Rules of Civil Procedure, the death of Plaintiff Rodney Johnson on March 25, 2024. Mr. Johnson's Death Certificate is attached as Exhibit A. Diane Johnson is the Proposed Executrix of the Estate of Rodney Johnson.

Pursuant to Fed. R. Civ. P. Rule 25(a), it is hereby requested that Diane Johnson, Proposed Executor of the Estate of Rodney Johnson, be substituted in place of Rodney Johnson as plaintiff in this action, so that Decedent's claims survive, and the action on his behalf may proceed. The request under this Motion is not sought for delay, but so that justice may be done.

PLEASE TAKE FURTHER NOTICE that pursuant to Local Rule 7.02, Plaintiffs' counsel has met and conferred with liaison and co-lead counsel for Defendants ("DCC") before the filing of this motion; the DCC has indicated that it does not object to the filing of this motion.

Date: May 2, 2024

Respectfully submitted,

SLATER SLATER SCHULMAN LLP

Michael S. Werner, Esq.

By: Michael S. Werner, Esq.

Slater Slater Schulman LLP

445 Broad Hollow Road, Suite 419

Melville, NY 11747

*Attorney for the Plaintiffs*

# EXHIBIT A

## CERTIFICATION OF VITAL RECORD

STATE OF IOWA  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CERTIFICATE OF DEATH

114-2024-007316

BIRTH NUMBER: *Not Available*

## DECEDENT INFORMATION

NAME: *Rodney Lee Johnson*

ALIAS:

PLACE OF BIRTH: *Iowa*ARMED FORCES: *No*DECEDENT MAIDEN LAST NAME: *Johnson*FATHER'S NAME: (prior to any marriage) *Allen Johnson*MOTHER'S NAME: (prior to any marriage) *Eula Jensen*RESIDENTIAL ADDRESS: *117 Harrison Street  
Newell, Iowa 50568*INFORMANT NAME: *Diane Johnson*INFORMANT RELATIONSHIP: *Wife*MARITAL STATUS: *Married*SURVIVING SPOUSE: (prior to any marriage) *Diane Franzmeier*DATE FILED: *03/27/2024*SSN: *478-86-4508*SEX: *Male*DATE OF BIRTH/AGE: *03/27/1960 63 Years*DATE/TIME OF DEATH: *03/25/2024 (Actual)**08:02 AM (Actual)*RESIDENCE COUNTY: *Buena Vista*COUNTY OF DEATH: *Buena Vista*PLACE OF DEATH: *Hospice Non-Facility*FACILITY/ADDRESS: *117 Harrison Street  
Newell, Iowa 50568*

## MEDICAL CAUSE OF DEATH INFORMATION

## INTERVAL UNITS

IMMEDIATE CAUSE OF DEATH: *Stage IV renal cell carcinoma*

Years

DUE TO OR AS A CONSEQUENCE OF:

DUE TO OR AS A CONSEQUENCE OF:

UNDERLYING CAUSE, IF ANY:

OTHER SIGNIFICANT CONDITIONS:

MANNER OF DEATH: *Natural*AUTOPSY PERFORMED/FINDINGS: *No*TOBACCO CONTRIBUTED TO DEATH: *No*M.E. CONTACTED: *No*DESCRIPTION OF INJURY: *None*METHOD OF DISPOSITION: *Burial*PLACE: *Newell Cemetery-Newell*LOCATION: *Newell, Iowa*FUNERAL DIRECTOR: *Timothy J. Smith  
Fratzke-Jensen Funeral Home-Storm Lake  
Storm Lake, Iowa 50588*CERTIFIER/TITLE: *Kyle J Glienke*

MD

DATE CERTIFIED: *03/26/2024*CERTIFIER ADDRESS: *620 Northwestern Dr  
Storm Lake, Iowa 50588*

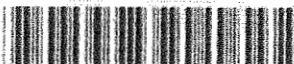
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03/27/2024  
DATE ISSUEDCOUNTY REGISTRAR  
County of Issuance: *Buena Vista*

DEPUTY STATE REGISTRAR



**CERTIFICATE OF SERVICE**

The undersigned hereby certifies that on May 2, 2024, a copy of the foregoing was filed electronically using the Court's Case Management/Electronic Case Filings System (CM/ECF). Notice of and access to this filing will be provided to all parties through CM/ECF.

/s/ Michael Werner, Esq.  
Michael Werner